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C O N F I D E N T I A L SECTION 01 OF 02 TRIPOLI 000834

DEPARTMENT FOR NEA/MAG

TRIPOLI 00000834 001.2 OF 002

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TAGS: PHUM PREL LY BG
SUBJECT: NURSES GONE, BUT LIBYA'S HIV/AIDS WOES CONTINUE

CLASSIFIED BY: Chris Stevens, DCM, Embassy Tripoli, Dept of State.. REASON: 1.4 (b), (d)

- 11. (C) SUMMARY. A lavishly-funded treatment facility constructed exclusively for the 426 infected Benghazi children remains off limits to hundreds of other Libyans in Benghazi currently living with HIV/AIDS, according to a team of American HIV/AIDS experts who visited Libya in mid-September. Though Benghazi doctors are capable of providing a high level of medical care, years of GOL propaganda and an over reliance on treatment abroad have created a lack of public confidence in Libya's ability to treat HIV/AIDS cases at home. Most of the 426 infected Benghazi children have traveled abroad for European government-subsidized medical care, many in the months before the medics' departure as a way to "prevent [the families] from raising their voices." Benghazi professionals criticized Europe's handling of medical assistance, claiming they have offered nothing concrete to Libya's healthcare system and are not willing to work cooperatively with their Libyan counterparts. Most Benghazi doctors still stand by the belief that the six medics are guilty of intentionally infecting 426 children with HIV/AIDS in 1999. END SUMMARY.
- 12. (U) A team from the Baylor College of Medicine Pediatric AIDS Program -- Dr. Mark Kline, Dr. Mike Mizwa, Dr. Gordon Schultze, and NP Nancy Calles -- visited Tripoli and Benghazi on September 16-18 as part of Baylor's ongoing implementation of an MOU concluded with the GOL in 2006. Kline, the U.S. representative on the Benghazi International Fund, and Calles briefed DCM and Poloff on their visit on September 18.

GOOD TREATMENT -- IF YOU CAN GET IT

- 13. (C) According to Kline, a lavishly funded facility designed to provide state-of-the-art care to the 426 Benghazi children, the Benghazi Children's Center (BCC), operates in parallel to the city's health system. The facility houses diagnostic equipment on par with that available in better European hospitals. Medical staff, drawn largely from the larger Benghazi Medical Center or al-Fatah Children's Hospital, receive large GOL stipends to do weekly rounds at the BCC. The BCC's staff include specialists in dentistry and optometry disciplines unrelated to the HIV/AIDS cases because "other medical facilities have made it clear they won't take the Benghazi children," forcing them to seek all medical care in this high-quality yet segregated facility.
- 14. (C) Though Kline is optimistic that the 1999 Benghazi outbreak will eventually spark some positive spillovers into the larger medical community, there is little evidence to suggest such spillover yet. Access to the BCC is restricted to the 426 Benghazi children. An additional 420 individuals, including 20 children, known to be infected with HIV in Benghazi must seek treatment at the sub-standard Benghazi Medical Center. Asked about the HIV/AIDS situation in Tripoli, Benghazi medical professionals told Kline and Calles that HIV/AIDS in Tripoli stems primarily from intravenous drug use and that no one in the GOL has suggested either opening the BCC to patients nationwide or training doctors from Tripoli as part of U.S.-BU-Iibya's ongoing medical cooperation. In Benghazi, they said, the virus has spread primarily through heterosexual contact, with the large number of sub-Saharan African immigrants playing a significant role.

RELIANCE ON EUROPEAN HOSPITALS BREEDS LACK OF CONFIDENCE IN BENGHAZI DOCTORS

- doctors to effectively manage HIV/AIDS cases is a major impediment. Victims' families, spurred on by GOL promises of "quality care" at European hospitals, have no confidence in Benghazi doctors' ability to treat the infected children. The Libyan doctors, frustrated with seven years of the families' doubts, have internalized a lack of self-confidence. Kline criticized European governments for emphasizing treatment in European hospitals as part of the "compensation deal," noting that France and Italy especially have compelling commercial reasons (i.e., the prospect of lucrative contracts in the arms and petroleum sectors) to accept the Benghazi children for expensive, months-long stays with accompanying elaborate tests and drug therapies.
- 16. (C) He emphasized that all of the children could receive quality care in Benghazi if the families were willing to try but they are not. According to Baylor's Benghazi contacts, as

many as 400 of the children, with GOL encouragement and financing, have sought medical care outside of Libya. They noted that from April to July 2007 -- in the run-up to the medics' departure -- several hundred families were sent off to Europe for months at a time to "prevent them from raising their voices" as the GOL worked to find a solution to the criminal case. On September 17, the Baylor team was scheduled to examine 50 patients at the BCC, but only 15 showed up. Hospital staff told the team the children's families had mostly left Libya since the July compensation payments (families received about USD \$1 million for each infected child), some moving permanently to Egypt and Saudi Arabia.

17. (C) According to the Baylor team, Benghazi hospital staff were unusually critical of European efforts in Benghazi. Addressing three European representatives — a British psychiatrist, an Italian physician, and a Dutch database management expert, the director of the BCC said, "You have done nothing for us." The director went on to praise Baylor for its concrete proposals and eagerness to work directly with the Benghazi medical community. The leader of the European team, UK psychiatrist Rafik Hosni, told Kline that the Europeans do not have an MOU analogous to Baylor's and have little clear direction for their medical engagement in Benghazi.

BENGHAZI DOCTORS STAND BY MEDICS' GUILT

18. (C) Kline noted that, almost without exception, Benghazi doctors refer to the 426 cases as the "injected children" rather than the "infected children." Though the Baylor team steered well clear of politics during their September 16-18 visit, every Benghazi doctor they spoke with maintains the Bulgarian medics were guilty of intentionally infecting the 426 children with the HIV virus in 1999.

STEVENS MILAM